

DECLARATION AND POWER OF ATTORNEY FOR UNITED STATES PATENT APPLICATION☒ Original☐ Supplemental☐ Substitute

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, and

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if more than one name is listed below) of the subject matter which is claimed and for which a United States patent is sought on the invention entitled

TREATMENT OF NEUROLOGICAL DISORDERS BY DSRNA ADMINISTRATION

the specification of which:

☐ is attached hereto.

☐ was filed on _____ as Application No. _____
(day/month/year)

and, if this box (☐) contains an *

☐ was amended on _____
(day/month/year)

☒ was filed as Patent Cooperation Treaty international Application No.

PCT/EP2003/009787 on 03/09/2003
(day/month/year)

and, if this box (☐) contains an *

☐ entered the national stage in the United States and was accorded Application No.

and, if this box (☐) contains an *

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I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) specifically referred to above and, if this application was filed as a Patent Cooperation Treaty international application, by any amendments made during the international stage (including any made under Patent Cooperation Treaty Rule 91, Article 19 and Article 34).

I acknowledge my duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56, including, for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or Patent Cooperation Treaty international filing date of the continuation-in-part application.

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COUNTRY/REGION (OR P.C.T.)	APPLICATION No.	FILING DATE (day/month/year)	PRIORITY CLAIMED
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<input type="checkbox"/> Yes	<input type="checkbox"/> No
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I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

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60/408000	04/09/2002
60/457971	27/03/2003

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Please send all correspondence relating to this application to the address associated with Customer No. 001095

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Full name of sole
or first joint inventor

Gabriele DORN

Inventor's signature

X Gabriele Dorn

Date

X 9/2/05
(day/month/year)

Residence

6343 Rotkreuz, Switzerland

CHX

Citizenship

citizen of Germany

Post Office Address

Binzmühlestr. 18
6343 Rotkreuz
Switzerland

Full name of second
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Pamposh GANJU

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GBN

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Full name of third
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Jonathan HALL

Inventor's signature

Date

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Residence

4143 Dornach, Switzerland

CHX

Citizenship

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Post Office Address

Ramstelweg 19
4143 Dornach
Switzerland

Full name of fourth
joint inventor, if any

Maria Wanda HEMMINGS

Inventor's signature

Date

(day/month/year)

Residence

4126 Bettingen, Switzerland

CHX

Citizenship

citizen of Poland

Post Office Address

Baiergasse 39A
4126 Bettingen
Switzerland

Full name of fifth
joint inventor, if any

William Leonard WISHART

Inventor's signature

Date

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Switzerland**

Full name of second
joint inventor, if any

Pamposh GANJU

Inventor's signature

Pamposh Ganju

Date

7th/02/05
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Residence

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Jonathan HALL

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Jonathan Hall

Date

04/02/05
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Post Office Address

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Switzerland**

Full name of fourth
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Maria Wanda HEMMINGS

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William Leonard WISHART

Inventor's signature

William Leonard Wishart

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X. Mr. Hennings

Date

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